Foster Family Home - Corrective Action Report

Provider ID:

1-512378

Home Name:

Marivyn Casino, CNA

Review ID: 1-512378-5

91-1035 Opaehuna Street

Reviewer:

David Ayling

Ewa Beach

H 96706

Begin Date:

8/22/2017

End Date: 8/22/17

Foster Family Home

Required Certificate

[17-1454-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

Home visit for a 2 person CCFFH recertification review made on 8/22/17. Home in compliance with all requirements. Home will receive a 2 year 2 bed certification.

Compliance Manager

Primary Care Giver

Date

8/22/17

Date